PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number 10/5946a I

| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | SMALL ENT TYPE | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | |
|--|--|---|--|---|---------------------------------------|---------------------|------------------------|----|-------------------------------|------------------------|
| U.S. NATIONAL STAGE FEES | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 LAR | | GE ENT. = \$ 300 | BASIC FEE | \$150 | OR | BASIC FEE | \$300 |
| EXAMINATION FEE | | | | | ther situations = \$ 100 / \$ 200 | EXAM. FEE | \$100 | | EXAM. FEE | \$200 |
| SEARCH FEE | | | U.S. is ISA = \$50 / \$100 ALL other countries = \$200 / \$400 | | other situations = \$ 250 / \$ 500 | SEARCH FEE | \$200 | | SEARCH FEE | \$400 |
| FEE FOR EXTRA SPEC. PGS. | | | minu | s 100 = | / 50 = | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 74 _{min} | us 20 = * | 54 | X \$ 25 = | | OR | X \$ 50 = | 7100 |
| INDEPENDENT CLAIMS | | | j mi | inus 3 = * . | | X \$ 100 = | | OR | X \$ 200 = | <i></i> |
| MUL | TIPLE DEPEND | DENT CLAIM PRI | SENT | | | + \$ 180 = | | OR | + \$ 360 = | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | TOTAL | | OR | TOTAL | 3600 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | | | SMALL E | SMALL ENTITY | | OTHER THAN SMALL ENTITY | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | , |
| TOTAL ADDIT. OR TOTAL ADDIT. FEE FEE | | | | | | | | | | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | = | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | = | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | • | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |
| | | | | | | | | | | • |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '20', enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than '3', enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.